

MAILING CERTIFICATE

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington D.C. 20231 on

Date: May 24, 1999

Signature

Kay Buley  
(print name)

MAY 27 1999

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Doherty and Clinton

Filing Date: January 20, 1999

Serial No.: 09/234,208

For: HER-2 BINDING ANTAGONISTS

Docket: 49321-1

Date: May 24, 1999

Assistant Commissioner for Patents  
Box Missing Parts  
Washington, DC 20231

**RESPONSE TO NOTICE TO FILE MISSING PARTS**

Sir:

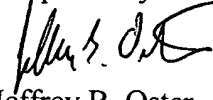
This is in response to the Notice to File Missing Parts of Application mailed March 22, 1999, for the above-identified patent application. Applicants enclose an executed Declaration and Power of Attorney and a Verified Statement Claiming Small Entity Status.

The filing fee (small entity) has been calculated as follows:

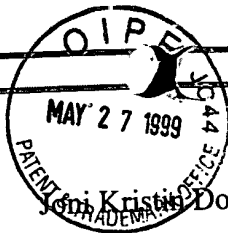
Basic fee (small entity)	\$380.00
Independent claims in excess of 3 (7x\$39)	273.00
Total claim in excess of 20 (6x\$9)	54.00
Surcharge	65.00
Total Filing Fee	\$772.00

A check in the amount of \$772.00 is enclosed. Please charge any extra charges or credit any overpayment to Deposit Account No. 04-0258.

Respectfully submitted,

  
Jeffrey B. Oster  
Attorney for Applicants  
Registration No. 32,585

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2600 Century Square  
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Seattle, WA 98101-1688  
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Applicants: Joni Kristin Doherty and Gail M. Clinton

Docket: 49321-1

Serial No.: 09/234,208

Filed: January 20, 1999

For: **HER-2 BINDING ANTAGONISTS****VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS  
37 C.F.R. §1.9(f) AND §1.27(d) -- NONPROFIT ORGANIZATION**

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

Oregon Health Sciences University  
3181 SW Sam Jackson Park Rd., L335  
Portland, OR 97201-3098

Type of organization:

- ☒ University or other institution of higher education.  
☐ Tax exempt under Internal Revenue Code (26 U.S.C. §§501(a) and 501(c)(3)).  
☐ Nonprofit scientific or educational under a state statute of the USA.

I hereby state that the above-identified nonprofit organization qualifies as a nonprofit organization as defined in 37 C.F.R. §1.9(e), for purposes of paying reduced fees under 35 U.S.C. §41(a) and (b), with regard to the invention entitled **HER-2 BINDING ANTAGONISTS** by the inventors Joni Kristin Doherty and Gail M. Clinton as described in:

- ☐ the specification filed herewith.  
☒ application serial no. 09/234,208, filed on January 20, 1999.  
☐ United States Patent \_\_\_\_\_, issued \_\_\_\_\_.

I hereby state that rights under contract or law have been conveyed to and remain with the nonprofit organization identified above, and/or there is an obligation under contract or law by the inventor(s) to convey rights to the nonprofit organization identified above, with regard to the invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern, or organization having rights in the invention is listed below and no rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 C.F.R. §1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 C.F.R. §1.9(d) or a nonprofit organization under 37 C.F.R. §1.9(e).

Full Name:

Address:

☐ Individual      ☐ Small Business Concern      ☐ Nonprofit Organization

I acknowledge the duty to file, in this application or any patent issuing thereon, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 C.F.R. §1.28(b)).

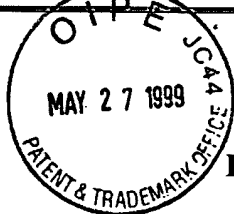
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Date 5/20/99



Sandra L. Shotwell, Ph.D.

Director, Technology and Research Collaboration, L335  
Oregon Health Sciences University  
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Portland, OR 97201-3098  
503-494-8200



Attorney Docket No.49321-1

#3

**DECLARATION AND POWER OF ATTORNEY**

As the below-named inventor, we declare that we are the original, first, and sole inventors of the subject matter which is claimed in the specification identified below and for which a patent is sought on the invention as titled therein. We hereby state that we have reviewed the contents of said specification, including the claims. We acknowledge the duty to disclose information which is material to the examination of this application in accordance with 37 C.F.R. §1.56.

Inventor: Joni Kristin Doherty  
Address: 3928 SE Ogden Street  
Portland, Oregon 97202  
Residence: Portland, Oregon, USA  
Citizenship: USA

Inventor: Gail M. Clinton  
Address: 3040 SW Beaverton Avenue  
Portland, Oregon 97201  
Residence: Portland, Oregon, USA  
Citizenship: USA

Title of Invention: **HER-2 BINDING ANTAGONISTS**

Serial No.: 09/234,208, filed on January 20, 1999\_\_

(X) There are no earlier-filed United States Patent Applications of which priority benefit is claimed.

( ) We hereby claim the benefit under 35 U.S.C. §120 of the United States Patent Application listed below, and, insofar as the subject matter of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 U.S.C. §112, we acknowledge the duty to disclose material information as defined in 37 C.F.R. §1.56 which occurred between the filing date of the prior application and the filing date of this application:

USSN:

Filed:

Status:

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